
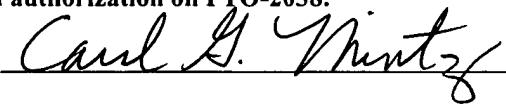
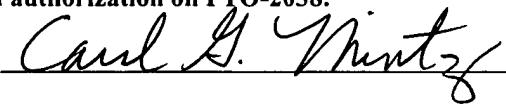
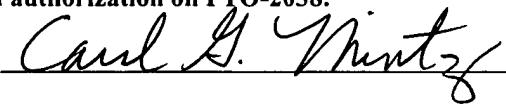


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 1856-09301																																																													
	In re Application of Alfred E. Keller																																																														
	Application Number 10/024,679		Filed December 18, 2001																																																												
	For Short Contact Time Catalytic Partial Oxidation Process for Recovering Sulfur From An H₂S-Containing Gas Stream																																																														
	Group Art Unit 1754		Examiner Timothy C. Vanoy																																																												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="width: 20%; text-align: right;">\$110.00</td> <td rowspan="5" style="width: 20%; text-align: center; vertical-align: middle; font-size: 2em; font-weight: bold;">RECEIVED NOV 12 2003 TC 1700</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____</td> <td></td> </tr> <tr> <td colspan="2"><input type="checkbox"/> A check in the amount of the fee is enclosed.</td> <td></td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</td> <td></td> </tr> <tr> <td colspan="3"><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</td> </tr> <tr> <td colspan="3"><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-2769.</td> </tr> <tr> <td colspan="3">I have enclosed a duplicate copy of this sheet.</td> </tr> <tr> <td colspan="3">I am the <input type="checkbox"/> applicant/inventor</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</td> </tr> <tr> <td colspan="3"><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,561</u></td> </tr> <tr> <td colspan="3"><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</td> </tr> <tr> <td colspan="3" style="padding: 10px;"> <p>WARNING: Information on this form may be come public. Credit card information should not be included On this form. Provide credit card information and authorization on PTO-2038.</p> </td> </tr> <tr> <td style="width: 30%; padding: 5px;"> <u>October 27, 2003</u> Date </td> <td colspan="3" style="padding: 5px; text-align: center;">  <u>Carol G. Mintz, PTO Reg. No. 38,561</u> Typed or Printed Name </td> </tr> <tr> <td colspan="4" style="padding: 5px;"> NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. </td> </tr> <tr> <td colspan="4" style="padding: 5px; text-align: right;"> 11/03/2003 CCHAU1 00000062 032769 10024679 01 FC:1251 110.00 DA </td> </tr> <tr> <td colspan="4" style="padding: 5px;"> <input type="checkbox"/> Total of _____ forms are submitted. </td> </tr> </table>				<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	RECEIVED NOV 12 2003 TC 1700	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$	<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____			<input type="checkbox"/> A check in the amount of the fee is enclosed.			<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-2769.			I have enclosed a duplicate copy of this sheet.			I am the <input type="checkbox"/> applicant/inventor			<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,561</u>			<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____			<p>WARNING: Information on this form may be come public. Credit card information should not be included On this form. Provide credit card information and authorization on PTO-2038.</p>			<u>October 27, 2003</u> Date	 <u>Carol G. Mintz, PTO Reg. No. 38,561</u> Typed or Printed Name			NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				11/03/2003 CCHAU1 00000062 032769 10024679 01 FC:1251 110.00 DA				<input type="checkbox"/> Total of _____ forms are submitted.			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	RECEIVED NOV 12 2003 TC 1700																																																													
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$																																																														
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$																																																														
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$																																																														
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$																																																														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____																																																															
<input type="checkbox"/> A check in the amount of the fee is enclosed.																																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																																															
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-2769.																																																															
I have enclosed a duplicate copy of this sheet.																																																															
I am the <input type="checkbox"/> applicant/inventor																																																															
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).																																																															
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>38,561</u>																																																															
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____																																																															
<p>WARNING: Information on this form may be come public. Credit card information should not be included On this form. Provide credit card information and authorization on PTO-2038.</p>																																																															
<u>October 27, 2003</u> Date	 <u>Carol G. Mintz, PTO Reg. No. 38,561</u> Typed or Printed Name																																																														
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																																																															
11/03/2003 CCHAU1 00000062 032769 10024679 01 FC:1251 110.00 DA																																																															
<input type="checkbox"/> Total of _____ forms are submitted.																																																															

This collection of information is required by 37 CFR 1.36(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.